## **SECTION IV**

## **PROPOSAL FORM**

I propose to furnish the City of St. Cha section, in accordance with the attache \$see Section III/EA.					
TOTAL COST \$ N/A		_			
UNIT COST IF CITY PAYS WITHIN 5 E * NOT APPLICABLE /EA	DAYS U	PON RECE	IPT/ACC	EPTANCE	
TOTAL COST (IF PAID WITHIN 5 DAY	'S): \$	NOT APPL	<u>ICABLE</u>		/EA
ALL PRICES ARE FIRM WITH NO ESC	CALATO	OR, THRU.	5/15/14.		
By submission of this bid I certify that the been submitted without collusion with a the type described in the preceding section.	any vend				
Shipment can be made F.O.B. City of Purchase Order.	St. Ch	arles		weeks after	receipt of
MANUFACTURER/MODEL #:	N/A				
COMPANY	-				
ADDRESS	_				
CITY, STATE, ZIP	-				
TELEPHONE	-				
SIGNATURE OF AUTHORIZED AGENT					
PRINTED NAME OF AUTHORIZED AGENT	-				
MWS:cjb					

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